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APPLICANTS

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**** CONTINUING DATA *******

None, Pkt

**** FOREIGN APPLICATIONS *******

None, Pkt

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/07/2001

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|---------------------------------|---|------------------------|----------------------|--------------------|-------------------------|
| Foreign Priority claimed | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY CA | SHEETS DRAWING 11 | TOTAL CLAIMS 72 | INDEPENDENT CLAIMS 4 |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged | <u>Examiner's Signature</u> <u>Pkt</u> Initials | | | | |

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TITLE

FUSION MOLECULES AND TREATMENT OF IGE-MEDIATED ALLERGIC DISEASES

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| FILING FEE RECEIVED 2140 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
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